

United States Of America  
Department of Transportation - Federal Aviation Administration  
**Supplemental Type Certificate**

*Number* SA7392SW

*This Certificate issued to* AAR Aircraft Services, Inc.  
DBA: AAR Aircraft Services-Oklahoma  
6611 South Meridian  
Oklahoma City, OK 73159-1104

*certifies that the change in the type design for the following product with the limitations and conditions therefor as specified hereon meets the airworthiness requirements of Part 23 of the Federal Aviation Regulations.*

*Original Product Type Certificate Number :* A16EU  
*Make :* Dornier-Werke  
*Model :* Do228-200

*Description of Type Design Change:*

Install Dual Collins APS-65 Autopilot/Flight Director System in accordance with AAR Drawing List 20L003, Rev. D, dated March 12, 1988, or later FAA approved revision.

*Limitations and Conditions:*

Airplane Flight Manual Supplement 20R005, dated March 21, 1988, is required.

Compatibility of this modification with previously installed equipment must be determined by installer.

*This certificate and the supporting data which is the basis for approval shall remain in effect until surrendered, suspended, revoked or a termination date is otherwise established by the Administrator of the Federal Aviation Administration.*

*Date of application :* September 14, 1987

*Date reissued :* March 5, 1999

*Date of issuance :* March 21, 1988

*Date amended :* June 7, 1988 Rev. 1



*By direction of the Administrator*

*S. Frances Cox*  
(Signature)  
S. Frances Cox, Manager  
Special Certification Office,  
Southwest Region

(Title)

INSTRUCTIONS: The transfer endorsement below may be used to notify the appropriate FAA Regional Office of the transfer of this Supplemental Type Certificate.

The FAA will reissue the certificate in the name of the transferee and forward it to him.

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### TRANSFER ENDORSEMENT

Transfer the ownership of Supplemental Type Certificate Number \_\_\_\_\_

to *(Name of transferee)* \_\_\_\_\_

*(Address of transferee)* \_\_\_\_\_  
*(Number and street)*

\_\_\_\_\_  
*(City, State, and ZIP code)*

from *(Name of grantor)* *(Print or type)* \_\_\_\_\_

*(Address of grantor)* \_\_\_\_\_  
*(Number and street)*

\_\_\_\_\_  
*(City, State, and ZIP code)*

Extent of Authority (if licensing agreement): \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Date of Transfer: \_\_\_\_\_

Signature of grantor *(In ink)*: \_\_\_\_\_